



County of Erie
Joel A. Giambra
County Executive

Factors That Affect Children and Families in Erie County:
Poverty, Violence, Child Abuse and Neglect

Erie County Community Coordinating Council on Children and Families
June, 2007

Erie County Community Coordinating Council on Children and Families

The Erie County Community Coordinating Council on Children and Families grew out of a mounting concern in the community in the mid-1980's, that there was a need to coordinate the many programs which provide services for children and families in Erie County. In 1988, the Erie County Legislature passed a proposal to establish the Erie County Community Coordinating Council on Children and Families. The legislation specified that the Coordinating Council include various County agencies and community groups which provide services for children and families in education, mental health, social welfare and medical health. Other community organizations and individuals involved with children and families also were asked to contribute in their specific areas of expertise as ad hoc Coordinating Council members.

The Coordinating Council acts in accordance with the Legislature's policy of preserving and strengthening the family unit and establishing a nurturing environment for children through the systematic coordination of services provided by local government and public-voluntary agencies. The Council's duties defined by the legislation include:

- Fostering cooperation among local government and public or private agencies;
- Eliminating duplication of services;
- Stressing meaningful accountability by service providers;
- Improving methods of ascertaining community needs and setting program goals;
- Identifying problems or deficiencies in existing services;
- Recommending correction action when appropriate.

The Council functions primarily by identifying a target population of children or families with a particular set of problems, researching their characteristics and needs, and recommending a course of action. This report, *Factors that Affect Children and Families in Erie County: Poverty, Violence, Child Abuse and Neglect*, addresses the increases in the percentage of children living in poverty, in often violent environments, and at increasing risk of abuse and maltreatment. The Coordinating Council is dedicated to improving this bleak picture and is willing to take on the tasks of improving the quality of children's lives, their family environments, and the institutions which serve them.

Erie County Community Coordinating Council on Children and Families

Members

American Red Cross
Amherst Youth Bureau
Amity House
Baker Victory Services
Berkshire Farms
Bethel Head Start
Boy Scouts of America
Boys & Girls Clubs of Buffalo
Buffalo Board of Education
Buffalo Urban League
Buffalo Pre-Natal
Care Management Coalition
Catholic Charities
CHC Learning Center
Child & Adolescent Treatment
Services
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Child Care Coalition
Children's Legal Center
Community Foundation for
Greater Buffalo
Compass House
Conner's Children's Center
Erie 1 BOCES
Erie County Assn. of School
Boards

Erie County Department of
Health
Erie County Department of
Mental Health
Erie County Department of
Probation/Youth Services
Erie County Department of
Social Services
Erie County Family Court
Erie County Legislature
Erie County Medical Center
Gateway-Longview Inc.
GA Family Services
Hillside Children's Center
Hispanics United of Buffalo
Homespace Corporation
Hopevale, Inc.
Iroquois Central Schools
Jewish Family Services
Joan A. Male Family
Support Center
KidsPeace
Kinship Family & Youth
Services
League for the Handicapped
Literacy Volunteers
Lutheran Social Services

Mental Health Association of
Erie County
Mid-Erie Counseling &
Treatment Services
National Federation for Just
Communities of WNY
Native American Community
Services
New Directions Youth and
Family Services
New York State Office of
Children & Families
New York State Office of
Mental Health
New York State Senate
Parent Network of Western
New York
St. Mary's School for the Deaf
Suicide Prevention and Crisis
Service
Transitional Services, Inc.
United Way of Buffalo &
Erie County
Western New York Children's
Psychiatric Center
Women's and Children's
Hospital of Buffalo
YWCA of Western New York



County of Erie

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ERIE COUNTY COMMUNITY COORDINATING COUNCIL ON CHILDREN AND FAMILIES

Dear Colleague:

June 1, 2007

We are pleased to provide you with this report, *Factors That Affect Children and Families in Erie County: Poverty, Violence, Child Abuse and Neglect*, produced by the Erie County Community Coordinating Council on Children and Families.

This publication reflects the input of a number of community partners, interpretive reports, probable correlates and information from community-based agencies and collaborations, and data collected from federal, state and Erie County government sources. It continues the charge given the Coordinating Council when it was established by the Erie County Legislature in 1989, that of evaluating, monitoring and ascertaining the effectiveness of current programs in children's services and reporting these results to the community.

The Coordinating Council comprises nearly 60 members from not-for-profit agencies, Erie County government, school districts, higher education, public officials and community activists. They are stakeholders committed to maximizing service provisions through judicious use of tax dollars, eliminating duplication of services, stressing accountability, and developing long-range plans to benefit the children's services system in Erie County.

We urge you to examine the data, discussion and recommendations and use them to support and guide your efforts to improve conditions for children and families in Erie County.

Sincerely,

A handwritten signature in black ink, appearing to read "Lana Benatovich".

Lana Benatovich
Co-Chair

A handwritten signature in black ink, appearing to read "Jim Casion".

Jim Casion
Co-Chair

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Introduction

Erie County is situated on the shore of a great natural resource: Lake Erie. Since the latter part of the 19th Century, through a convergence of circumstances over which most of our residents had no influence, access and use of the Lake was unavailable. Now, in the early part of the 21st Century, plans are underway to develop and nurture our waterfront, thereby assuring residents of access to an important dimension of high-quality of life in Erie County.

This willingness to examine the mistakes of our past and plan for the future must be applied to another natural resource in Erie County: our children. Frequently, the main reason for “investing” in children is that we recognize as a group that they represent the future of our society. However, other values add to the imperative of investing in positive outcomes for children. First, by the nature of human development, ***children are the least able to advocate for their own survival; therefore, every society that survives assigns nurturing and protective roles to the community of adults.*** Second, ***when children meet developmental milestones, succeed in education, and enter productive employment systems, they contribute to the overall wellbeing of society rather than become burdens and then possible social service expenditures.***

In Erie County, we cannot tolerate a failure to grow and nurture our nearly 210,000 youth. In fact, it is the responsibility of every community member to provide the

stewardship necessary to ensure life success for our children.

In 1988, the Erie County Legislature created the Erie County Community Coordinating Council on Children and Families (Coordinating Council). This partnership, comprising representatives from the profit and not-for-profit community, government, education, foundations, and diverse community-based agencies, seeks to enhance the efficacy of services delivered to those in need, and to develop programs which promote a brighter future for our children.

The Coordinating Council exists by law with the broadly stated purposes of fostering cooperation among social service agencies, eliminating duplication of services, stressing accountability, improving methods of identifying needs, setting program goals, identifying problems in service delivery, and suggesting solutions to those problems. In accordance with its statutory responsibilities, the Coordinating Council periodically publishes reports on the state of children and families. This report is the latest edition in that tradition.

During late 2004, because of large deficits, Erie County government implemented a budget that called for extensive reductions in service and employee costs. As a follow-up, the Commissioners of Erie County Departments of Social Services and Mental Health requested that the Coordinating Council examine the relationship between County budget decisions of 2005 regarding preventive services programs and the overall

costs of delivering services to children. While some social service positions and service expenditures have been restored, today in 2007, it is the impression of professionals in the community social services system that the financial reductions to up-front (less restrictive) preventive services resulted in an expanding demand by families for deep-end (more restrictive) services later on.

As a community, we will incur greater overall expenditures by reducing services in prevention programs. Children and families benefit from a strategy which identifies service needs and offers intervention early on; this helps to diminish risk and reduce the utilization of other more costly programs in our child welfare service continuum. Such a hypothesis is supported by the standards of the U.S. Department of Health and Human Services, which emphasize prevention and early intervention in making policy and funding decisions. Further, the New York State Office of Children and Family Services has adopted a similar preventive strategy in order to offer individualized services to vulnerable families.

With the available data and the methods used in this report, such a causal relationship cannot be proven. However, the report is intended to offer the opportunity to develop hypotheses for later examination and build an understanding of possible relationships among important variables. Additionally, the report will supply information about indicators of child wellbeing and provide a degree of meaningful

attention to the social environment of Erie County.

The conclusions in this report can serve as the beginning of a data baseline that can be applied to future examinations of child wellbeing.

Educators, community organizers, policy makers, and program administrators can use the report when considering the present needs of children. Additionally, since this is a beginning, we hope that future child welfare professionals will endeavor to examine and expand these indicators in planning programs for child and family needs. The Coordinating Council recognizes that this is the beginning of a process and invites comments, suggestions, and recommendations from all perspectives that converge on the wellbeing of our children.

Method

Our report is based upon an ecological systems model which maintains that all human development and interaction takes place within a complex series of systems (Bronfenbrenner, 1989). In this theoretical model, the individual is ensconced within a network of other interacting micro-, meso-, exo-, macro-, and chrono-systems. One of the key strengths of the model is that of a chrono-system, in which different elements are examined over the passing of time.

The assumptions of the model are threefold:

- Individual and environment interaction and influence are continual.
- Individuals are active participants in development.

- Changes exert influence in reciprocal and multiple directions.

Therefore public policy, community living conditions, family structure, and individual behavior all have complex and reciprocal effects upon each other. Additionally, these effects are continuous and change over the passing of time.

The effort to investigate the Commissioner's charge can be described as a data summary approach in which the Coordinating Council identified relevant characteristics that have an impact on children and families in Erie County. The information used was derived through official sources and through anecdotal reports of community experts from various disciplines representing child caring agencies. These experts were in a unique position to examine data, speak comprehensively and sensitively about client experiences, and share observations based upon many years of practical experience.

Because the types of data used in writing this report include statistics from various official sources, interpretive reports, and information from community-based agencies and collaborations, we noted several challenges. When data is presented on a County-wide basis, it may lead to incomplete or distorted conclusions regarding populations within the County. For example, if we rely on the U.S. Census poverty data related to Erie County, we might overlook the poverty rate for the City of Buffalo because it is balanced by the financial wellbeing of wealthier suburbs.

In some cases, data that were originally intended for inclusion in this analysis were unavailable. In some instances, the information has not been collected, and in others, the problem is lack of access to information. Further, organizations collect data in different ways and with different parameters. One example of this would be a variation of age range, which renders the data between studies incompatible. A second example is that one child-caring agency may present data with an upper limit of age 18, while another agency may collect data with an upper limit of age 21. Therefore, it is difficult to extrapolate meaning when the comparison data are so different. We found that many data systems do not specify familial versus non-familial, racial, or ethnic characteristics. Data regarding race and ethnicity are collected and identified in various ways (if at all) among the social services organizations.

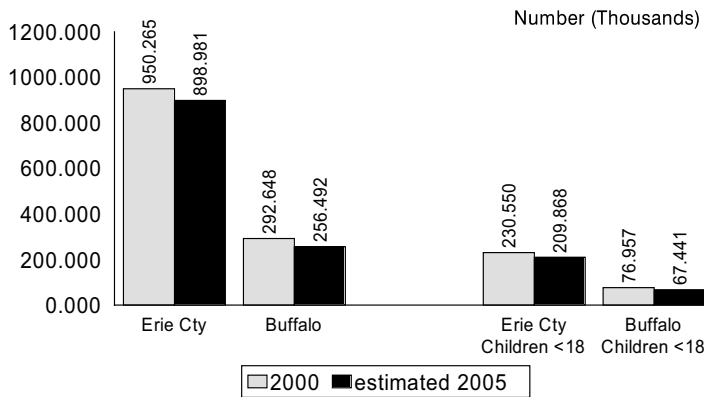
Finally, we are uncertain about the uniformity of processes for identifying race or ethnicity. Some agencies assign individuals to these categories based upon service worker observations rather than seeking consumer self-identification. Although these are challenges, we have confidence that this analysis offers an accurate description of the status of children and families in Erie County with regard to poverty, violence, and child abuse and neglect.

Population

The 2000 U.S. Census established the Buffalo population as 292,648. For the year 2005, the City of Buffalo population is estimated to

Figure 1

Population Erie County and Buffalo Census Data: 2000 and estimated 2005



Resource: American FactFinder Website
Data Source: U.S. Census Bureau

have dropped more than 12 percent to 256,492. Similarly, the U.S. Census estimates the population of Erie County in 2005 to be 898,981 which would be a 5 percent reduction from the official 1990 statistics. Individuals living in the City of Buffalo comprise approximately 30 percent of Erie County residents (Figure 1).

It is estimated that approximately 209,868 youth under 18 years of age reside in Erie County, representing 23 percent of the population. In the City of Buffalo, there are approximately 67,441 youth under 18 years of age, representing more than 26 percent of the population in the City of Buffalo and 32 percent of Erie County residents (Figure 1).

Looking at race characteristics within the City and County population (Figure 2), we find that nearly 82 percent of Erie County and 50 percent of City residents self-identify as white. Those that self-identify as Black/African American represent nearly 13

percent of the County and nearly 38 percent of City residents. The remainder of residents self-identifying as Asian, Hispanic, Native American, and two or more races, total less than 9 percent in both the City and County. The third largest county-wide category is identified as Hispanic, with 3.5 percent of the population. In the City of Buffalo, those self-identifying as Hispanic or Latino of any race represent 7.6 percent of the population.

According to the U.S. Census estimates for 2000, the population of Erie County was 981,025 and of that population, approximately 122,628 people were Black/African American. At the same time, the population for the City of Buffalo was 292,648 and of that population, approximately 110,035 were Black/African American. This indicates that ***nearly 90 percent of the Black/African American population in Erie County resides within the City of Buffalo.***

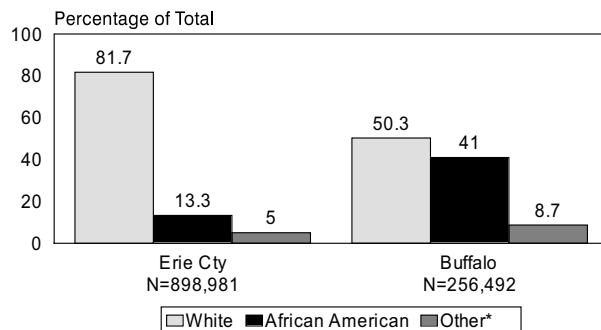
In terms of gender or sex, Erie County is typical of the U.S. population. Approximately 51 percent and 49 percent of our population self-identify as male or female respectively among adults and children.

Poverty

In 1969, the federal government developed a measure of poverty called the poverty "line" or threshold. This indicator is updated annually by the U.S. Census Bureau and is used for statistical purposes. The federal poverty threshold for 2005 was

Figure 2

Population by Race Erie County and Buffalo Estimated 2005



Ethnicity - Erie County: 3.5% Hispanic or Latino of any race; Buffalo: 7.6% Hispanic or Latino of any race
* Other: Asian, American Indian, 2 or more races, other

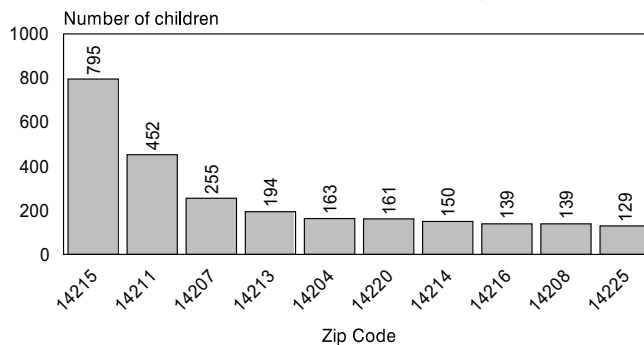
Resource: American FactFinder Website; 2005 American Community Survey
Data Source: U.S. Census Bureau

approximately \$20,600 for a family of four. In no way does this statistic help to understand the experience of poverty in terms of daily living and consequential risk factors. However, it is the reference used in this report to measure poverty in Erie County. ***Nearly 17 percent of children in the United States are being raised in poverty. Poverty is a risk factor associated with many other social problems including child maltreatment, family stress, school failure, and delinquency.***

Ironically, many of the children experiencing poverty reside with a working parent. According to the U.S. Census Bureau (2005), the income of a family consisting of a single parent and two children, with the parent working full-time at an hourly wage of \$7.15, falls below the federally established poverty line. This does not take into account the impact of inflation or rising costs of necessary family expenses such as child care. For these “working poor” families, access to and availability of supportive services, whether government or community agency-based, are critical to survival. Figures 3 and 4 offer a snapshot of the Erie County Department of Social Services Low Income Daycare and Daycare Subsidies delivered during the first nine months of 2006. Low income daycare is offered to the “working poor” who are not eligible for Temporary Assistance to Needy Families (TANF). Parents receiving TANF may receive Daycare Subsidies to offset expenses incurred while working or engaged in work related activities.

Figure 3

Daycare Data: Buffalo Top 10 Zip Codes with Highest Number of Children Receiving Low Income Daycare Time Period: As of February 2007*



* Totals as of February 07 - one month
Resource: Erie County Department of Social Services

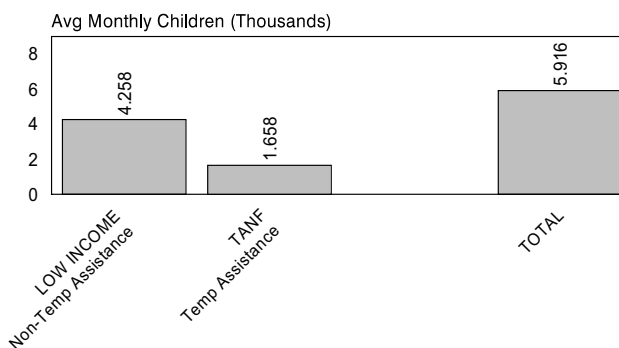
Since 2000, the child poverty rate in New York State has hovered near 20 percent (NYS Kids' Well-being Indicators Clearinghouse). During the same period, the child poverty rate in Erie County has been slightly below the state level. This might be seen as a positive since the children in Erie County are experiencing poverty at a lower rate than the other 4 million youth in New York State. Yet, according

to the Annie E. Casey Foundation (2005), New York ranks only thirty-fourth among the United States for child poverty.

Other factors give pause when considering key poverty indicators within Erie County. According to the University at Buffalo Institute for Local Governance and Regional Growth (2006), the City of Buffalo reflects the wealth gap that persists

Figure 4

Daycare Data: Buffalo Daycare Subsidies Paid: Average Monthly Children Nine Months ended September 2006*



* Data from October through December 2006 is impacted by the conversion of payments from local payment system to BICS and is not directly comparable; The first nine months were fairly consistent from month to month.

Resource: Erie County Department of Social Services

between some of our poorest communities and neighboring communities within the same county boundaries. The phrase “wealth gap” describes a discrepancy that exists within Erie County, in which one community (Buffalo) has a poverty rate nearly double the U.S. average while other communities within the county have a lower poverty rate and higher income than the nation.

Buffalo has the largest population of any city in Erie County and more than 33 percent of the City of Buffalo’s children experience poverty (U.S. Census Bureau).

Family structure is an important characteristic that we must examine in this report. Single mothers are the most likely group to live in poverty and experience problems related to poverty. Children in families headed by single females are more likely to live in poverty. Again, there is a wide disparity when one compares Erie County with the City of Buffalo on this important variable (Figure 5).

According to the U.S. Census Bureau (2000), the percent of children growing up in “married couple family” households in both New York State and Erie County is over 70 percent. In New York State and Erie County, the percentage of single female-headed households is approximately 25 percent. However, *in the City of Buffalo, more than half of the children live in a single female-headed household. Therefore, nearly one-half of our City of Buffalo families live in circumstances that increase the likelihood of lower economic, educational, and health outcomes.* Of these households in Buffalo, more than 40 percent are below the

poverty level (Figures 6 and 7 – refer to page 8).

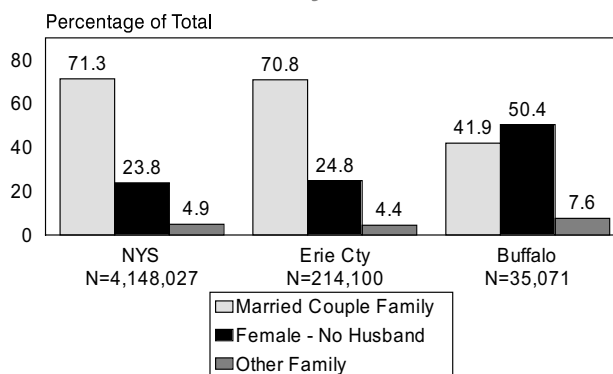
While Erie County is on par with New York State as to the percentage of single female-headed families, the City of Buffalo is almost double that percentage. This should cause policy makers to examine the factors that lead to a community in which families with only one parent has become the norm.

Race or ethnicity provides an alternative perspective for examining poverty and when this perspective is applied, questions are raised as to whether our community excludes specific groups from access to the advantages that other groups enjoy. *Upon examining racial and ethnic factors within the City of Buffalo, it becomes clear that individuals and families of color are more severely affected by poverty.*

Figure 5

Population by Family Type: Own Children Under 18

NYS, Erie County and Buffalo 2000

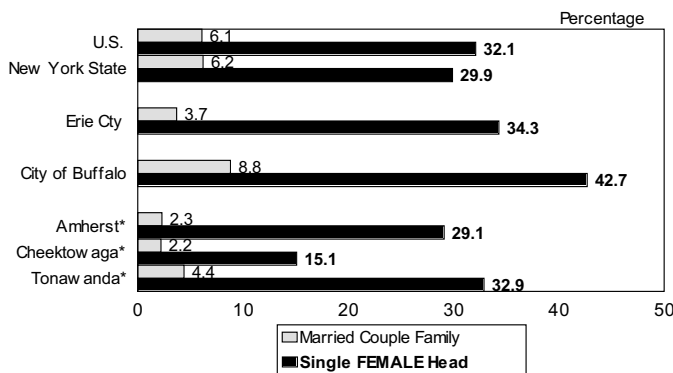


Resource: NYS Kids' Well-being Indicators Clearinghouse; American FactFinder Website
Data Source: U.S. Census Bureau

Figure 6

Poverty Rates: By Household-Type

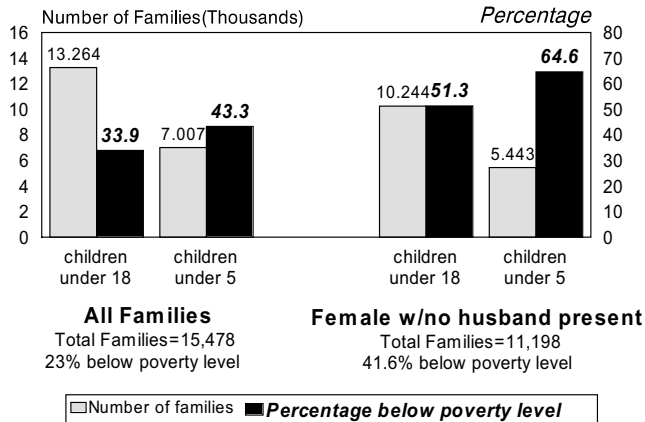
National, NYS, Erie County, Buffalo, & Municipalities 2005



*Towns of Amherst, Cheektowaga and Tonawanda are the three largest first-ring suburbs of Buffalo
Resource: Poverty in NYS and Buffalo Niagara: Updates from the U.S. Census Bureau report; Institute for Local Governance and Regional Growth; University at Buffalo
Source: U.S. Census Bureau American Community Survey

Figure 7

Poverty Status: Buffalo 1999 (below poverty level)



Resource: American Fact Finder website
Data Source: U.S. Census Bureau

According to the U.S. Census estimates, 43 percent of Buffalo residents who self-identified as Hispanic lived below the poverty line in 2005, followed by 33 percent of blacks, and 17 percent of non-Hispanic whites (Figure 8). Poverty among the Hispanic, Black/African American, and non-Hispanic white populations in the remainder of Erie County was similar to the U.S. average. Therefore, our concern regarding the association between race/ethnicity and poverty is specific to the City of Buffalo.

In addition to the wealth gap, a trend exists in which our Hispanic community members seem to be rapidly migrating from the City of Buffalo to suburban areas as they achieve more economic wellbeing. Such a tide of out-migration will contribute to further depletion of economic resources in Buffalo.

Closer examination of Figures 9 through 14 and Maps 1 and 2, illustrates that a disparity in economic health exists in Erie

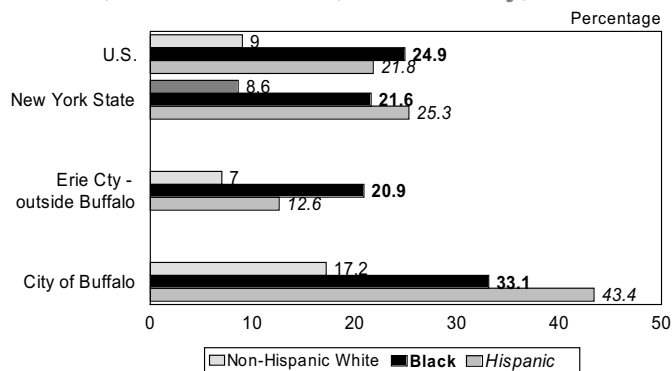
County and within the City of Buffalo. Nearly 88 percent of families receiving TANF reside in the City of Buffalo (Figure 9 – refer to page 9; Map 1 – refer to page 12), while approximately 12 percent of families receiving TANF reside in surrounding communities. Of the Erie County Department of Social Services Food Stamp caseload, more than 78 percent of recipients reside in the City of Buffalo, while more than 21 percent reside in other communities (Figure 10 – refer to

page 9; Map 1 – refer to page 12). A lesser but still wide discrepancy exists in the Medicaid caseload. Nearly 70 percent of Medicaid recipients live in Buffalo while nearly 30 percent of recipients live in other Erie County communities (Figure 11 – refer to page 10; Map 1 – refer to page 12). These data all work together to contribute to the County/City wealth gap.

Our evidence further illustrates pockets of deep poverty within the City of Buffalo. The January caseload data from Erie County Department of Social Services indicates that more than 11,000 families, or 52 percent, of the TANF caseload reside within three zip codes: 14211, 14213, and 14215 (Figure 12 – refer to page 10; Map 2 – refer to page 13). The remaining 7 out of the top 10 zip codes for families receiving TANF totaled slightly more than 10,063. We need to be aware that each TANF case by definition includes children. The discrepancy is not as dramatic in the Food Stamp and Medicaid caseloads with approximately 47 and 45 percent respectively of the families residing

Figure 8

Poverty Rates By Race and Ethnicity National, New York State, Erie County, & Buffalo 2005



Resource: Poverty in NYS and Buffalo Niagara: Updates from the U.S. Census Bureau report; Institute for Local Governance and Regional Growth; University of Buffalo
Source: U.S. Census Bureau 2005 American Community Survey

in zip codes 14211, 14213, and 14215 (Figures 13, 14 – refer to page 11; Map 2 – refer to page 13).

Many families require low-income day care in order to participate in work or work-related activities. Figure 3 (refer to page 6) illustrates that all of the top 10 ranking zip codes for low-income day care are in the City of Buffalo, and more than 48 percent of those consumers reside within zip codes 14215 and 14211. (Map 2 – refer to page 13).

All of this information illustrates a high concentration of social services recipients in these geographic areas. It is therefore reasonable to investigate in these specific areas the impact of budget cuts, minority status, crime, educational success, drop-out rates, and local employment opportunities.

While a wealth gap exists between those living in the City of Buffalo and those in other areas of Erie County, concern over the disparity should not be limited only to City stakeholders. Recent evidence indicates that poverty has become a

concern in the first-ring suburbs (Figure 15 – refer to page 14).

Although the magnitude of poverty as a social problem looms greater in the City of Buffalo, the growth rate of poverty in the communities of the Towns of Amherst, Cheektowaga, and Tonawanda surpasses the City.

While the poverty rate for all families in the City of Buffalo increased from 26.6 to 26.9 percent between 1999 and 2005, the growth of the poverty rates over the same period for these first-ring suburbs

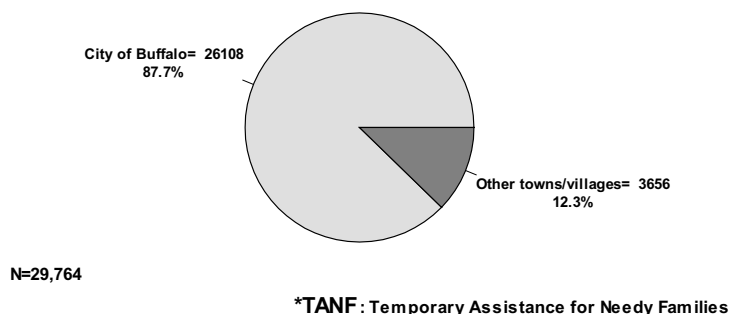
was greater. Between 1999 and 2005, Tonawanda experienced the most substantial increase from 6.9 to 11.2 percent, followed by Amherst 6.4 to 8.2 percent, and Cheektowaga 6.5 to 7.8 percent.

Educational accomplishment has been demonstrated to be an effective protective factor from poverty. More education is positively correlated with higher economic power over the course of a lifetime. Therefore, educational outcomes must be examined in the context of measures that reduce poverty in the long term.

The dropout rate during 2003 for adolescents in grades 9 through 12 in New York State was just over 4 percent, while the dropout rate in Erie County was less than 4 percent (Figure 16 – refer to page 14). When comparing the dropout rate in the City of Buffalo with the remainder of Erie County, a significant disparity is noted. In 2003, the dropout rate for Buffalo students in grades 7 through 12 was 8.9 percent, and in the 2004 to 2005 school year, the dropout rate increased to 9 percent (Figure 17 – refer to page 15).

Figure 9

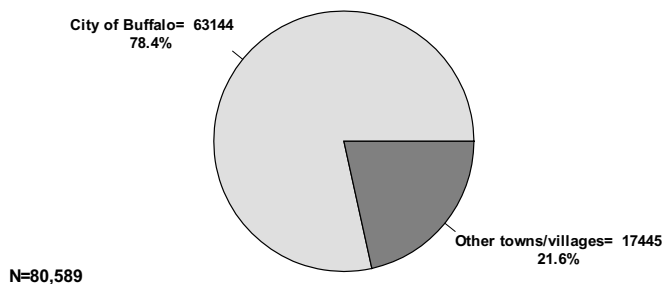
Erie County TANF* Household Counts Data as of 1/27/07



Resource: Erie County Department of Social Services

Figure 10

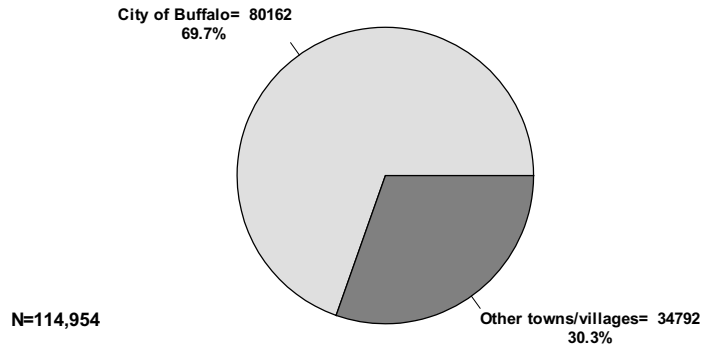
Erie County Food Stamp Recipients Data as of 1/27/07



Resource: Erie County Department of Social Services

Figure 11

Erie County Medicaid Recipients Data as of 1/27/07



Resource: Erie County Department of Social Services

Figure 12

TANF* Household Counts: Buffalo Top 10 Highest by Zip Code Data as of 1/27/07

Buffalo Zip Code	Number of Households
14213	4,028
14215	3,670
14211	3,383
14207	2,555
14201	1,874
14212	1,470
14208	1,095
14210	1,042
14206	1,026
14214	1,001

*TANF: Temporary Assistance for Needy families

Resource: Erie County Department of Social Services

Figure 13

Food Stamp Recipients: Buffalo
Top 10 Highest by Zip Code
Data as of 1/27/07

Buffalo Zip Code	Number of Households
14215	9,149
14211	6,977
14213	6,617
14207	5,531
14201	3,694
14212	2,946
14210	2,910
14206	2,874
14204	2,719
14220	2,484

Resource: Erie County Department of Social Services

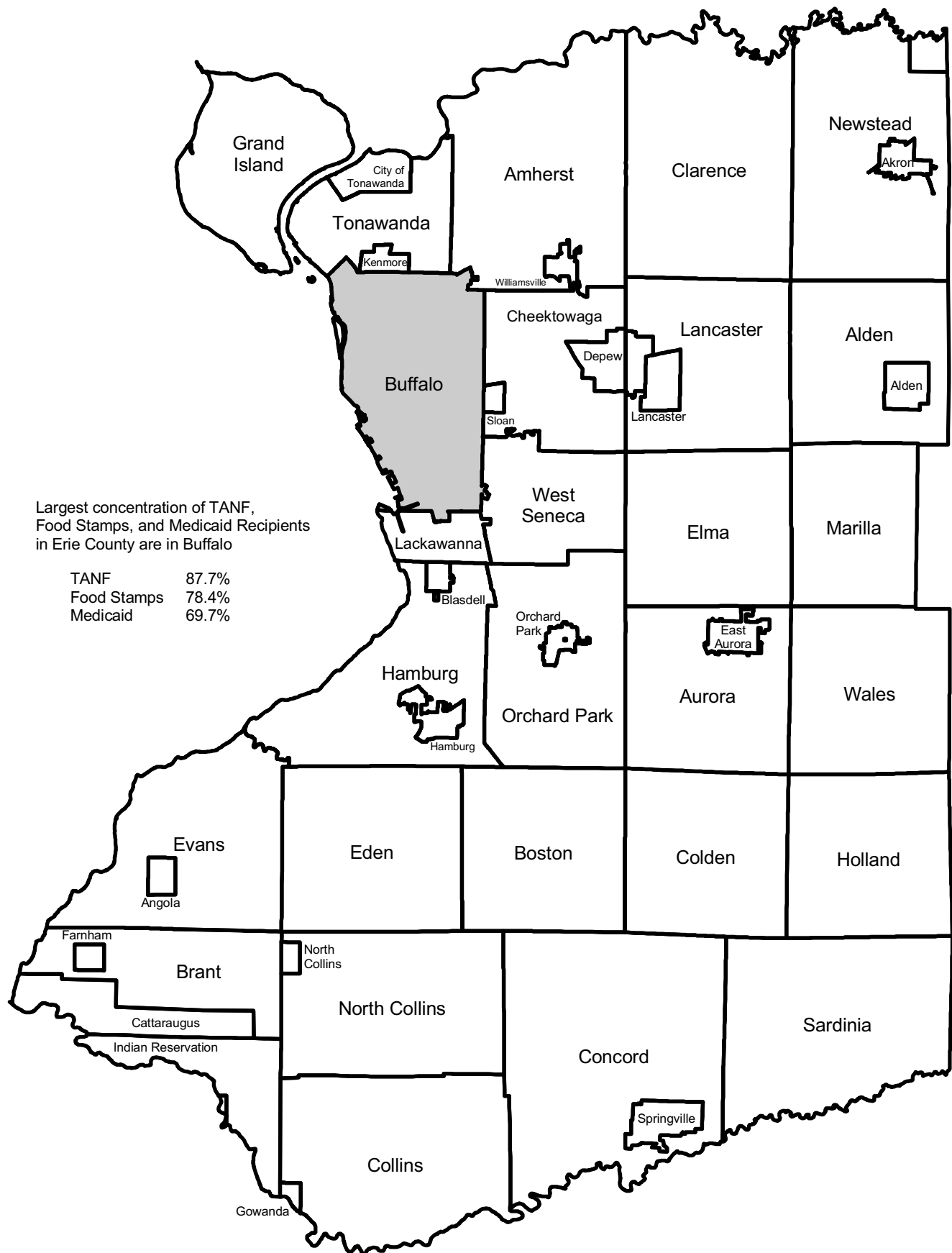
Figure 14

Medicaid Recipients: Buffalo
Top 10 Highest by Zip Code
Data as of 1/27/07

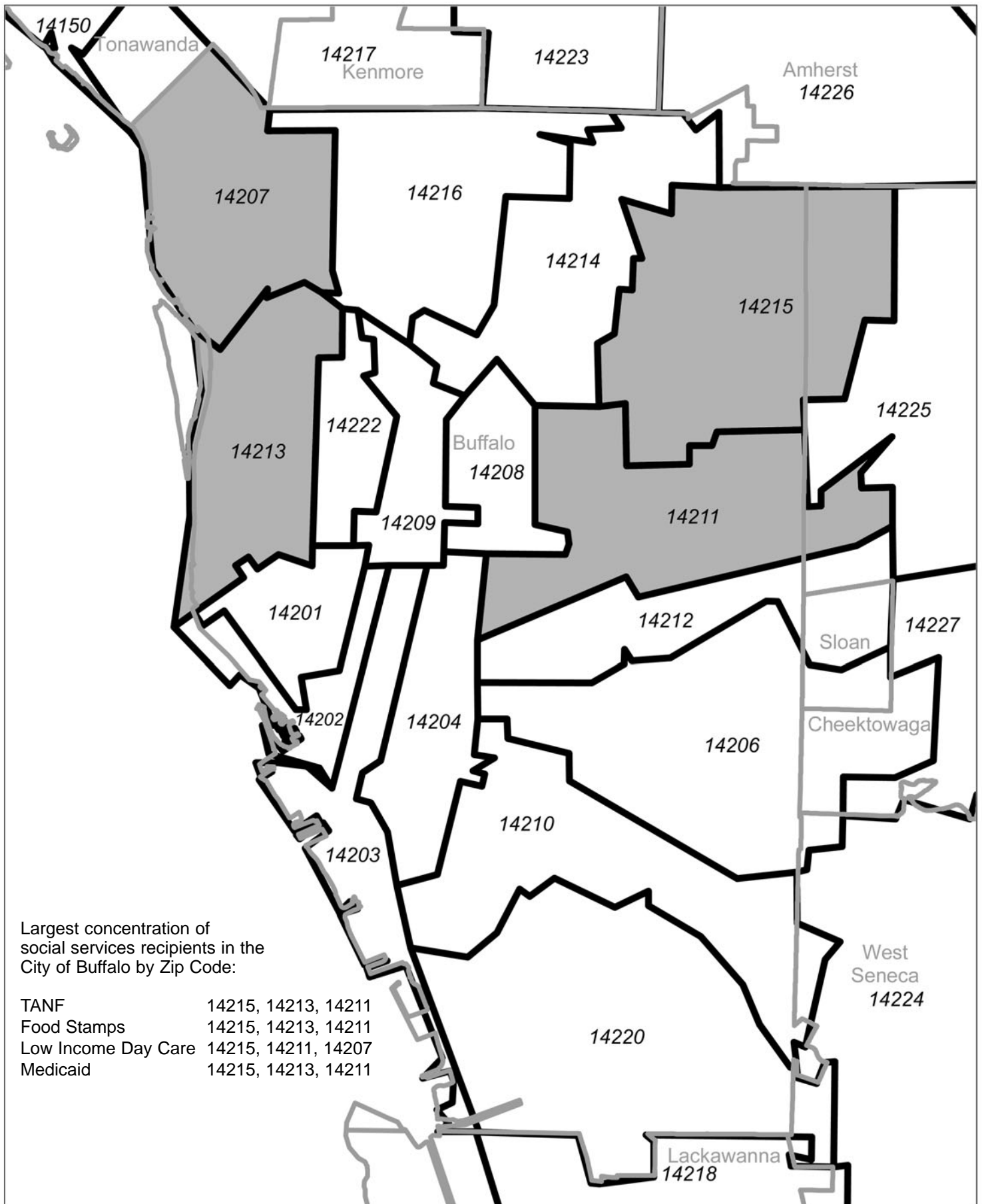
Buffalo Zip Code	Number of Households
14215	10,609
14213	7,774
14211	7,650
14207	6,498
14201	4,496
14206	3,740
14220	3,502
14212	3,485
14210	3,422
14216	3,254

Resource: Erie County Department of Social Services

Map 1: Erie County Cities, Towns and Villages



Map 2: Enlargement of the City of Buffalo with Zip Codes



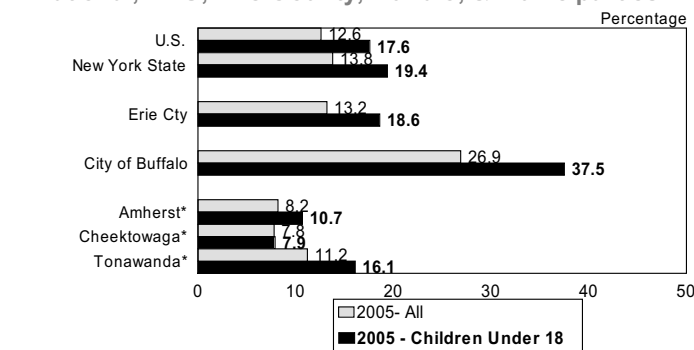
For example, *in a hypothetical high school freshman class of 100 students, 9 of this group will drop out of school as freshmen. When the 9 percent dropout rate is compounded over the course of 4 years, fewer than 70 of the original 100 freshman students would graduate.* The present dropout rate is the highest that Buffalo has seen in at least ten years. This factor raises serious concerns for the long range socio-economic health of these youth and our community.

In terms of completing a high school education, more than 79 percent of individuals residing in New York State have earned a high school diploma, while nearly 75 percent of those in Buffalo have a diploma. In New York State 27.4 percent of people over the age of 25 have earned a bachelor's degree or higher, compared to only 18.3 percent of those in Buffalo (U.S. Census Bureau). Buffalo residents lag behind fellow New York State residents by nearly 5 percent and 33 percent respectively in terms of high school and college graduation.

In 2005, those living in the Buffalo-Niagara area with less than a high school diploma had an average income of \$20,063, which, depending on the number of dependents, may place a family at or below the poverty line. Those with a high school diploma or GED earned \$26,723, which places a family in close proximity to poverty (depending on the number of children). This level of income does not insulate a family from the impact of unexpected illness, sudden increases in housing costs, and unplanned expenses (Institute for Local Governance and Regional Growth, 2006).

Figure 15

Poverty Rates: All Families and Children Under 18 National, NYS, Erie County, Buffalo, & Municipalities 2005



*Towns of Amherst, Cheektowaga and Tonawanda are the three largest first-ring suburbs of Buffalo

Resource: Poverty in NYS and Buffalo Niagara: Updates from the U.S. Census Bureau report; Institute for Local Governance and Regional Growth; University of Buffalo

Source: 2005 poverty rates from U.S. Census Bureau's Current Population Survey (U.S. data) and American Community Survey (state and local data)

This is further evidence that we must develop effective strategies for engaging and retaining our youth in the educational system. The failure to accomplish this contributes to the cycle of poverty. In many cases, these children have been born into poverty and are likely to remain there when they become parents. As a community, we have an obligation to help our youth sustain educational effort until they are prepared to succeed

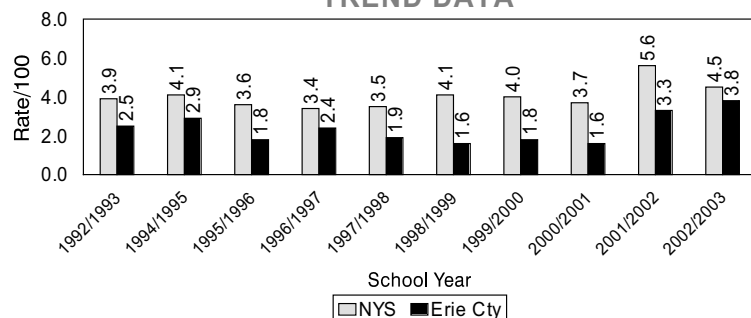
in the employment sector or enroll in higher education.

Resources are available to assist individuals and families to cope more effectively with poverty. Such resources do not eliminate the effects of poverty, but they do increase the likelihood that individuals and families may ameliorate risk factors. In a community such as ours, it is critically important that residents access the help that is offered.

Figure 16

Annual Dropouts - Public Schools Students Enrolled in grades 9-12

Erie County and NYS Average
TREND DATA



Resource: NYS Kids' Well-being Indicators Clearinghouse

Data Provider: NYS Education Department

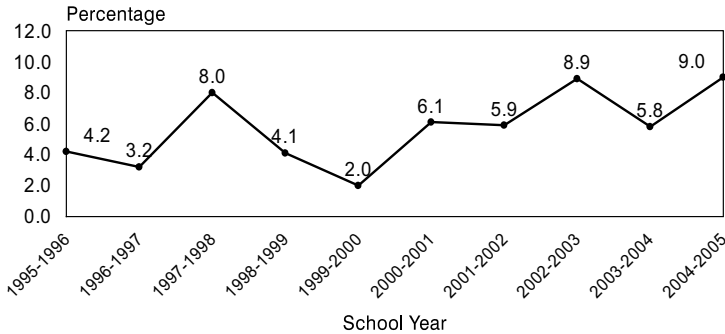
Data Source: NYS Education Department; Office of Information; Reporting and Technology Services

Population Source: NYS Education Department

Figure 17

District Dropout Percentages* Buffalo

Students Grades 7-12 by Year



* Dropout data compiled by taking the number of students that have dropout of school and dividing this number by total number of students

Source: Attendance Services Office by the Office of Shared Accountability

According to the Brookings Institute, poverty has risen nationwide, affecting cities and suburbs since 2000. This economic reality emphasizes the need to utilize “powerful tools” such as the Earned Income Credit for helping families suffering the effects of economic downturns (2007). Additional programs that can help these at-risk families include: free or reduced-price school lunch, low income daycare, and daycare subsidies. Other social programs such as child support enforcement and health care coverage are acknowledged as critical help for families. While the value of those programs is unquestioned, they are not within the scope of this report.

Violence

Violence must be conceptualized in multiple dimensions. Behavioral science literature tends to describe violence in terms of victims, perpetrators, life stages, special settings, and the organizations that intervene.

Additionally, there are multiple and overlapping systems that are stakeholders in prevention, response, and treatment of violence. This examination will focus on several factors that relate to violence in Erie County. By no means is this an exhaustive study of the relevant data. There are many other ways to study this serious social problem.

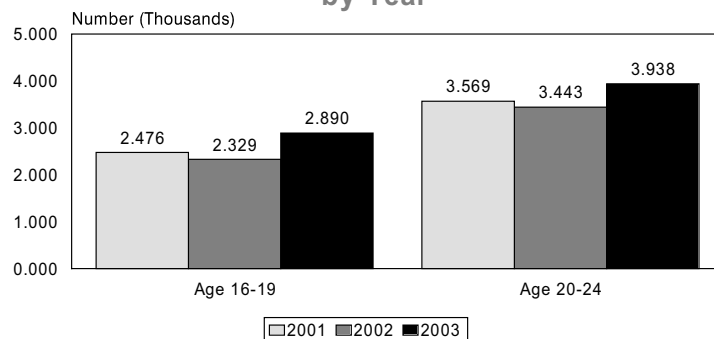
In some cases, the variables we

study are clearly and directly recognized as acts of violence. In other cases, violence or the risk of violence is more inferred as a result of recognized relationships among variables. For example, we have examined arrests for murder and arrests for driving while intoxicated. The latter category is relevant because of its obvious potential for death or serious injury. Among youth, we included violent crimes against others as well as property crimes. We have included factors related to adult behavior due to the obvious impact of the behavior on child wellbeing. Domestic or family violence is a good example of this. Therefore, we have included data related to arrests that result from family or partner violence as well as comments on services delivered to those who have been subjected to such violence.

For the three-year period 2001 through 2003, the Erie County Sheriff’s Department noted an increase in commitments to the Holding Center of nearly 17 percent among youth aged 16 to 19 year olds. There was a 10 percent

Figure 18

Erie County Holding Center Age When Committed by Year



% Increase from 2001 to 2003: Ages 16-19 = 16.7%; Ages 20-24 = 10.3%

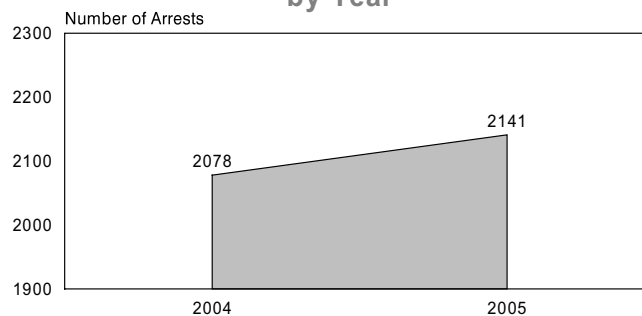
Resource: Erie County Sheriffs Office: Jail Management Division

increase in commitments among the 20 to 24 year old group (Figure 18 – refer to page 15). Noteworthy is the increase in commitments of 561 individuals, or 24 percent, from this younger group between years 2002 and 2003. According to the New York State Division of Criminal Justice Services, there were 2,141 arrests of youth under the age of 21 in 2005 (Figure 19). This equaled an increase of 63 youth arrested, or a 3 percent increase, from 2004. During the same two-year period, 18 youth under the age of 21 were arrested for murder, an increase of 63 percent from the 11 arrests in 2004. In this five year period, significantly more Erie County youth have been arrested and entered the criminal prosecution system. Additionally, these youth are involved in serious crimes that have lifelong implications for the individual, families, and the community.

A meaningful understanding of child wellbeing in a community may be extrapolated from juvenile delinquency and crime statistics. These are good indicators because it has long been known that juvenile crime rates are intricately linked and correlated with education, socio-economic status, and level of positive parental influence and involvement in children's lives. When considering what to do with youth involved with juvenile delinquency and crime, judges have great latitude in making dispositions because some crimes are less serious than others. Examples of judicial options range from dismissal, or, with more serious offenses, out-of-home placement with local departments of social services.

Figure 19

Felony Arrests: Youth Under 21 Years Erie County by Year



% Increase from 2004 to 2005: 3.0%

Resource: NYS Division of Criminal Justice Services

According to the New York State Task Force on Juvenile Justice Indicators, nearly 2 percent (18 per 1,000) of all Erie County children ages 10 to 15 were arrested for various offenses in 2004. Among those arrested in that year, the rate of violent offenses was nearly 11 percent. When considering youth between the ages 16 to 19, the violent crime rate increased more than five times to a rate of more than 10 violent offenses per 1,000 in Erie County. Erie County has the second-highest rate in New York State of secure detention admissions for arrested youths ages 10 to 17. Two-thirds of all juvenile delinquent intakes are referred to court, and in cases that warrant immediate out-of-home placement, either to a secure facility or non-secure facility, 40.7 percent of these youths are found guilty of felonies (VERA, 2007).

Although less likely to be thought of as violence, property crime is considered as aggressive behavior by youth and as on a continuum

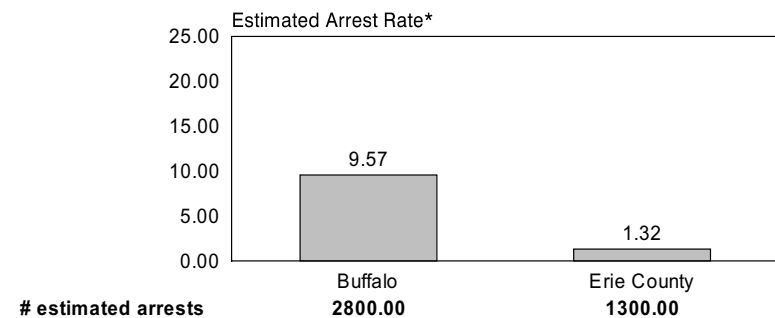
toward later violent acts.

Delinquent behavior progresses in sequence from covert behavior such as stealing to overt behavior such as fighting and violence (McWhirter, 2007). In 2004 in Erie County, nearly 2 percent, or 20 out of every 1,000, youth between the ages of 13 and 15 were involved with property-related crimes. As observed with violent crime, there was a sharp increase of nearly 40 percent among the 16 to 19 year old group when compared with the younger age group in committing property crimes (New York State Permanent Judicial Commission on Justice for Children).

Statewide statistics are startling for youth of color, drawing the attention of experts to examine “disproportionate minority contact” (DMC). Excluding New York City, Black/African American youth comprise more than 11 percent of the New York State population, yet they represent 29 percent of all youths arrested. Further, black youth make up 55 percent of all youth incarcerated in New York State. In other words,

Figure 20

Domestic Violence Arrests Estimated Rates* for Buffalo and Erie County (2006 arrests compared to 2000 Census data)



*Estimated Rate = Estimated number of arrests in 2006 resulting from domestic violence divided by 2000 population census times 1000

Resource: Erie County District Attorney's Office
Data Source: U.S. Census Bureau

Black/African American youth are arrested at a rate that is nearly three times more than expected when examining the racial makeup of the State population. Statistics for youth in Erie County reflect the DMC phenomenon, the New York State Task Force on Juvenile Justice Indicators (VERA) found that Erie County youth exceed the expected arrest rates. In addition to being overrepresented among those arrested, Black/African American youth have a much greater likelihood of experiencing incarceration. **Although Black/African American youth account for only 13 percent of the Erie County population, they comprise 37 percent of all youth arrested.**

This is only glimpse of the complex relationship that our youth have with the criminal justice and legal systems. There is limited examination of data regarding youth involved with status offenses or juvenile delinquency involving violence. We have not examined issues related to County-City, community, or particular local

jurisdictions. Further, it is critically important to examine the developmental and family factors related to violence in Erie County.

Family violence is a broad category that may include child abuse, domestic violence, partner abuse, and other threatening behaviors. Family violence can involve law enforcement agencies, social service agencies, and the court systems. The data used in this category was obtained from the Buffalo Police Department, the Erie County Departments of Social Services, District Attorney and Sheriff as well as community contract agencies.

In the United States, there is a decline in the rate of partner violence, but our local community has noted a different trend. According to the U.S. Department of Justice (2007), statistics demonstrate that the 2004 rate of partner victimizations has fallen "...to 2.6 victimizations per 1,000 individuals." Unfortunately, circumstances are not as positive in our local community.

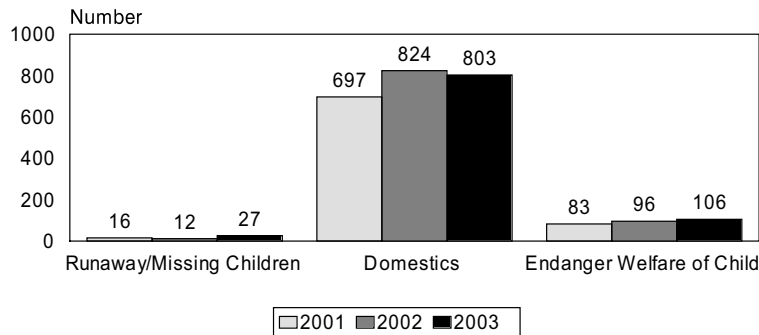
According to the Erie County District Attorney's Office, more than 21,000 cases have been referred to the City of Buffalo Domestic Violence Court since it was established in March, 1999. It is estimated that during 2006 more than 2,800 arrests resulting from domestic violence were made in the City of Buffalo and these cases were referred to the Domestic Violence Court. When compared with the 2000 census population (292,648), there are nearly 10 domestic violence arrests per 1,000 people in the City of Buffalo (Figure 20). In a theoretical case example, driving down any street in Buffalo that has 100 homes, it could be reasonably expected that at least one arrest for domestic violence took place on that street in 2006.

Although we are comparing victimizations from the national report with arrests in the local data, the rate of domestic violence events for Buffalo is nearly four times higher than the national average of victimizations in the latest U. S. Department of Justice report. Additionally, during 2006, more than 1,300 domestic violence arrests were referred to town and village courts within Erie County. Within those numbers, 1 child and 5 adult homicides resulted from domestic violence. (The dispositions of these cases were not available for this report.)

Figure 21 (refer to page 18) provides data for 2001 to 2004 on the number of complaints requiring a response by the Erie County Sheriff's Office Family Offense Unit. During this three-year period, the Family Offense Unit responded to cases involving domestic violence, runaway or

Figure 21

Family Offense Unit Complaints by Year



Resource: Erie County Sheriffs Office

missing children, and child endangerment. The average annual intake for this unit is 774 domestic violence cases. During the three-year period, the number of child endangerment complaints investigated by this unit rose from 83 to 106, an increase of nearly 28 percent. When compared with the statistics from the City of Buffalo, it appears that the remaining Erie County jurisdictions covered by the Family Offense Unit have significantly fewer incidents of

domestic violence and related family issues that require law enforcement intervention.

The Erie County Department of Social Services has been required by law since 2001 to maintain a Domestic Violence Liaison. The responsibilities include assessment of domestic violence claims by welfare applicants and recipients, determination of social service needs, and identification of safety factors that would be jeopardized

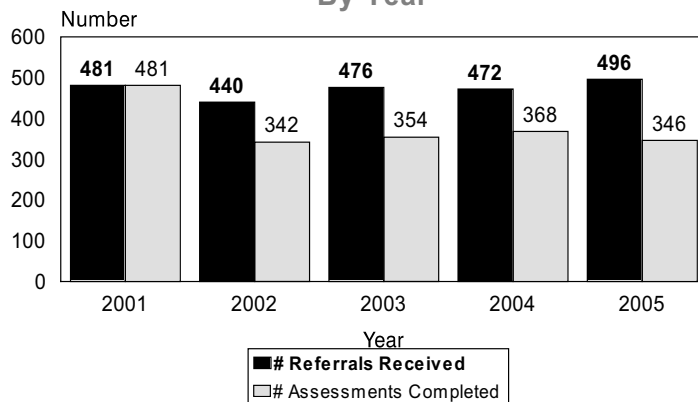
by fulfilling welfare reform requirements. The Domestic Violence Liaison Unit may delay for a period of at least four months the victims' participation with social service requirements such as paternity establishment, child support, spousal support, employment activities, alien deeming, minors' living arrangements, teen-parent education, substance abuse assessment and treatment, and other welfare-to-work requirements. These waivers can be extended following a reassessment of the recipient's situation.

Figure 22 illustrates the number of referrals and assessments completed by the Erie County Department of Social Services Domestic Violence Unit for the period 2001 to 2005. Individuals applying and re-certifying for social services voluntarily participate in a screening and assessment process. The number of clients referred during this five-year period has steadily increased by 3 percent, with 496 referrals received in 2005. However, the number of assessments that are completed each year has been steadily decreasing; only 346 assessments were completed in 2005, a 28 percent reduction, and the number of assessments completed hasn't equaled the number of referrals since the year 2001 (Figure 22).

It would be speculation to assert specific reasons for the reduction in assessments or the disparity between referrals and assessments. The environment of Erie County budget and staffing cuts in 2005, the high rate of domestic violence cases in the City of Buffalo, and the pervasiveness of poverty in our

Figure 22

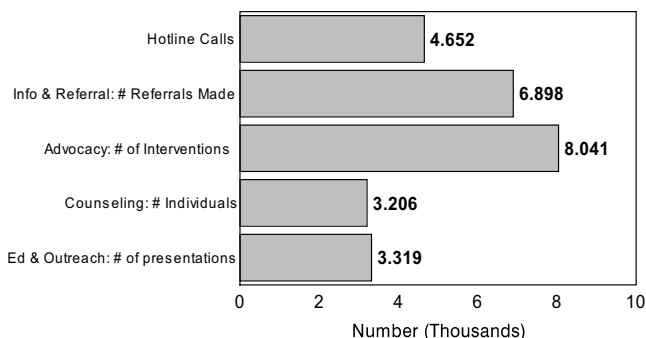
Domestic Violence Unit Liaison Referrals & Assessments By Year



Resource: Erie County Department of Social Services

Figure 23

Services to Domestic Violence Victims Provided by Contracted Agencies* Required Core Services 2005



*Resource: Data Provided by Contracted Agencies (Child and Family Services, Crisis Services, D.A. Office, Hispanics United of Buffalo, Inc, Erie County Sheriff Office)

Data Source: Erie County Department of Social Services Adult and Specialized Services Division

urban center, make it difficult to attribute the reduction in referral and assessments to a decline in domestic violence among applicants for social services.

Figure 23 offers a glimpse of the volume related to domestic violence in Erie County. It includes hotline calls, advocacy interventions, information and referrals, counseling, and community education. While providing 26,116 responses to domestic violence needs, these community based agencies also experienced decreases in program funding from Erie County during 2005. ***Policy makers in Erie County government and community based agencies must ask if the funding and staff needed to deal with domestic violence cases are sufficient.***

Child Abuse and Maltreatment

When a report of child abuse or maltreatment (including neglect) has entered the Erie County Child

Protective Services (CPS) system, it must be investigated, and within sixty days of that report, a decision is made as to whether the report is unfounded or indicated. Unfounded means that CPS found no credible evidence of child abuse or maltreatment. An indicated report means that CPS identified some credible evidence of abuse or maltreatment. It must be noted that in many instances, unfounded reports after investigation may still require services. In those cases,

although no evidence was found of parent mistreatment of children, the familial circumstances were such that case planning and service delivery were needed to lower the risk of future child abuse or neglect.

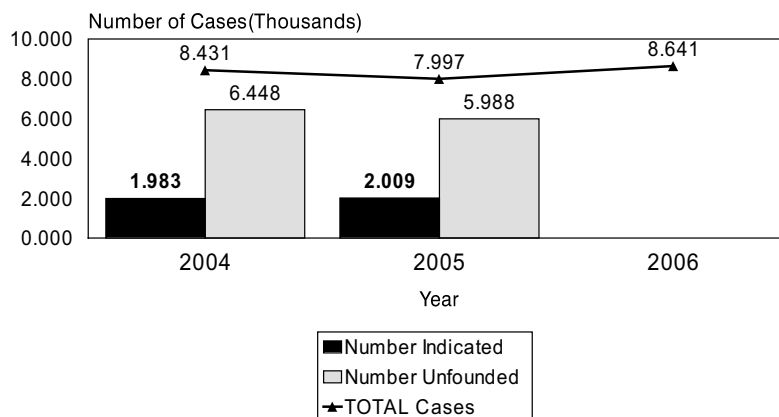
According to the U.S. Department of Health and Human Services (2006), the rate of child abuse and neglect reporting increased by less than 1 percent in 2004. In that year, approximately 3 million CPS referrals, involving approximately 5.5 million children, were made to CPS agencies. This represented a national rate in which 42.6 referrals per 1,000 children were made to CPS compared with 39.1 referrals to CPS per 1,000 children in 2003.

According to the New York State Office of Children and Family Services, in 2006 the total number of CPS reports for investigation in Erie County was at its highest rate in three years (Figure 24).

After a decline of nearly 5 percent in the reporting rate when comparing 2004 with 2005, the projected number of CPS investigations in 2006 rose by 8

Figure 24

Child Protective Services: Erie County CPS Reporting by Year



percent to 8,641. These reports involved 11,496 children. The Erie County reporting rate in 2006 was nearly 55 per 1,000 children referred to CPS.

In New York State during 2004, approximately 30 percent of CPS reports were indicated, meaning that the local protective agency found some credible evidence of the abuse or maltreatment. Figure 24 (refer to page 19) demonstrates the most recent indication rates for Erie County. In both 2004 and 2005, nearly 25 percent of reports were found to have some credible evidence that children were maltreated, abused, or neglected. The local rate of indication is approximately 16 percent lower than the statewide average.

The intake level of CPS, whether reports are indicated or unfounded, has a direct impact upon the availability and utilization of services offered by government and community-based systems. This is because CPS has traditionally served as the gateway point for services to children and families. It is understood that high rates of CPS reporting would result in a higher intake for all child serving systems.

The number of children referred to the Child Advocacy Center for investigation, assessment, and treatment services as a result of sexual abuse declined by nearly 10 percent between 2004 and 2005 (Figure 25). The Child Advocacy Center estimated that in 2006 the case count will be approximately 483, which represents nearly an 8 percent increase from 2005. This increase is consistent with other data that indicate an increase in reports of child abuse and neglect.

A Range of Services to Children and Families: “Up Front and Deep-End”

As mentioned earlier, preventive social services for children and families experienced funding reductions in 2005. Additionally, recent significant changes in New York State law affected the need for social services. The Erie County Department of Social Services implemented policy in 2001 that intended to reduce the number of children in residential care and shorten the average length

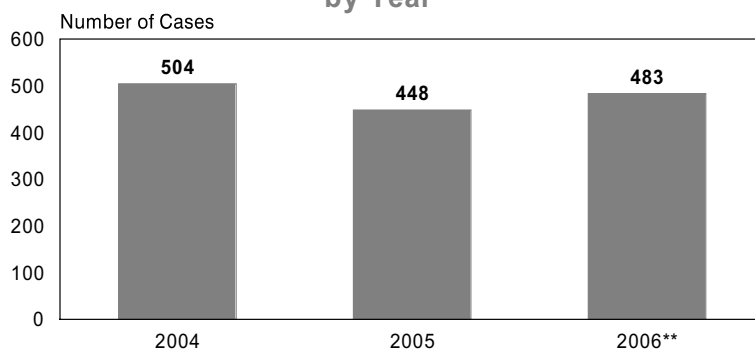
of stay in foster care. The laws regarding Persons In Need of Supervision (PINS) were amended in 2002 and 2005 to expand service delivery. The 2002 amendment expanded the eligibility for PINS status to include 17 year olds and the amendment of 2005 required documentation of diligent efforts to provide preventive services for youth before cases could proceed to the Family Court.

After the 2005 County budget cuts in Preventive Services funding, the policies aimed at reducing spending for out-of-home care, and the statutory expansion of service eligibility for PINS, the Coordinating Council asserts that other parts of the child services system experienced a corresponding pressure in the form of increased demand. Such an assertion is very consistent with the assumptions of the ecological systems model wherein it is a given that system changes exert influence in reciprocal and multiple directions. A challenge to the Coordinating Council is to identify points in the services system that may have been affected, arrive at conclusions about the impacts, and apply this knowledge in future program planning.

In this regard, the Council has identified the following service programs as relevant: Erie County Department of Social Services (traditional and preventive services, intensive preventive services, and out-of-home care), Family Voices Network: WRAP (WRAP), Compass House Emergency Shelter, Crisis Services Outreach Services, Erie County Medical Center Comprehensive Psychiatric Emergency Program (CPEP), and other emergency services for children.

Figure 25

Child Advocacy Center Sex Abuse Cases* by Year



* Does not include care for kids or pre-placements

** 2006 annualized data based on actual data from 2006 as of 12/14/06 (actual number was 463)

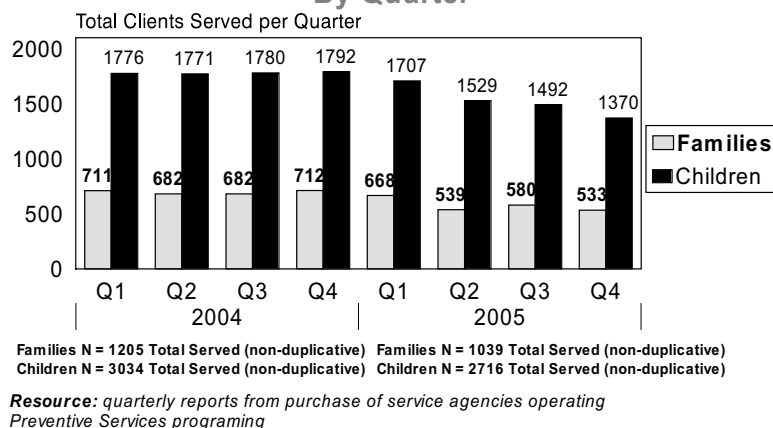
Preventive Services

Traditional preventive services (TPS), intensive preventive services (IPS), and foster care services are provided by the Erie County Department of Social Services either directly or through contracts with community-based agencies. Both types of preventive services are designed to decrease the likelihood that children will be placed out-of-home, hasten the return home from placements, and to support the reunification of families after return from out-of-home care. Under special circumstances the services can be offered when children are already placed out-of-home and help is needed to prevent placement in a more restrictive level of care.

The most obvious difference between TPS and IPS is the amount of time (intensity) that is allocated by caseworkers to families and children. In the IPS model, a worker can be available up to twenty hours (on a twenty-four hour per day, seven days per week basis) in a given week to intervene and support families. The emphasis of the program is to offer more concrete services, such as food and transportation, in addition to the clinical services. As a result of the service intensity, IPS caseloads are smaller when compared to traditional models, and the service is offered for intervals of eight weeks rather than six months. In order to be eligible for IPS, a child must be at imminent risk of out-of-home placement. Immanency relates to immediacy and generally means that the placement event would take place on an emergency basis without this intensive intervention. IPS may be offered for preventive or reunification purposes.

Figure 26

Total Served Preventive Services: Traditional By Quarter



From 2004 to 2005, the number of families served by IPS was virtually unchanged. There were 190 families served in 2004 and 191 families served in 2005. However, there was a significant change in the demand or apparent need for the service. Concurrent with the same amount of families served and the 2004 TPS budget cuts, was growth of the IPS waiting list by more than 40 percent from 107 to 151 families.

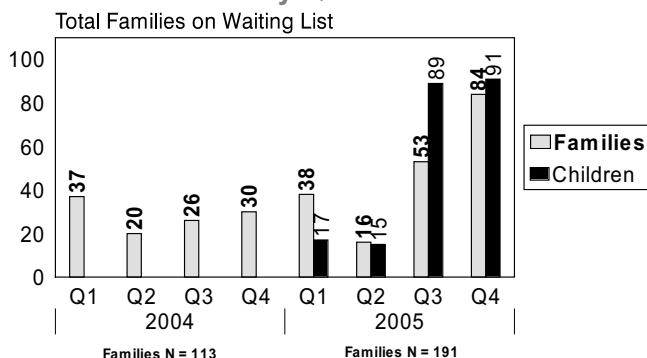
New York State law recognizes that families may need TPS for a variety of reasons that may result from abandonment, child behavior or disability, parent service needs, or child abuse and maltreatment. TPS include, but are not limited to, case management, developmental disability services, rehabilitative services to restore parent capacity, skill-building services, housing, and transportation. When it is determined that children are at risk of out-of-home placement and this would be averted by family-centered, strength-based services, the local department of social services will offer TPS. Similarly,

in terms of eligibility, when children are returned to families after out-of-home placement, TPS may be offered as part of a reunification plan. Therefore, this category of services may be offered to prevent entrance into a higher level of care or to help strengthen the return to family.

The Erie County budget cuts of 2005 resulted in severe reductions of funds for TPS. Figure 26 illustrates that 2,320 families were served. This represented a reduction of nearly 17 percent in comparison to 2004. One of the direct consequences of the funding cuts was a significant growth in the waiting list for TPS. From 2004 to 2005, the waiting list grew by nearly 70 percent from 113 to 191 families (Figure 27 – refer to page 22). ***Considering the extensive and severe community risk factors, and the critical responsibility involved with TPS, there is nothing that indicates a lessening of the need for any preventive service in Erie County.***

Figure 27

Waiting List Preventive Services: (Referrals Were Rejected by Agencies due to Inadequate Capacity) Traditional By Quarter



Resource: quarterly reports from purchase of service agencies operating Preventive Services programming

Out of Home Placement

This report will consider the number of children in foster care, congregate care versus family foster care (including placement with relatives), length of stay in care, discharge considerations, and the racial characteristics of our placed population. While this inquiry is limited in scope, consideration must be included in policy making and service delivery for the consequences that placements have for all children and families in Erie County.

There are multiple options when children need to be placed away from their families, including family foster care, kinship placement, and congregate care. The criteria used in making placement decisions include consideration of the child's safety or welfare, and the willingness of the parent or legal guardian to keep the child at home. Additionally, such placements require by statute a process that includes assessment of child and parent need, arranging/providing of services, and evaluation of progress toward

service plan goals. Each placement involves the judicial system and frequently requires services from clinical treatment, special education, law enforcement, and prosecutorial systems. The resources for placement whether with extended family, family foster care, or facilities, must meet specific standards and be approved or licensed by New York State.

When children require placement away from their families it activates a complex set of actions

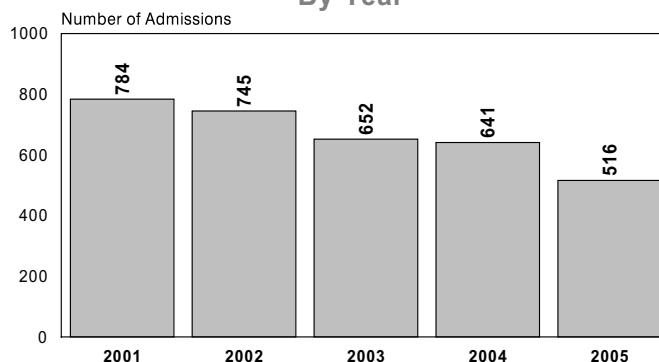
and has effects throughout our community.

Foster Care

The number of Erie County children entering family foster care declined each year from 2001 to 2005 (Figure 28). Between those years, the reduction of placements declined by 266, or 34 percent, from 784 to 516 children. The greatest one-year decrease over the past five years took place between the end of 2004 and the end of 2005 when 123 fewer children were placed in care (New York State Office of Children and Family Services Data Warehouse). In New York State, approximately 69 percent of children in out-of-home placement enter family or relative foster care; nearly 26 percent of children enter congregate care and 5 percent are in other placements. Figure 29 (refer to page 23) illustrates that during the period 2002 to 2004, approximately 35 percent of out-of-home placements in Erie County resulted in children being placed in congregate care (this includes group homes and residential care). Traditionally, children in

Figure 28

Foster Care Admissions Children under Age 18 By Year



% decrease from 2001 to 2005 was 34.18%

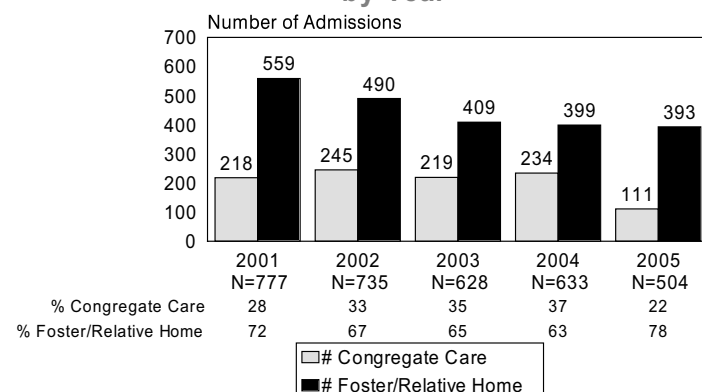
Resource: NYS OCFS Data Warehouse (children in foster care from various levels of service)

congregate care exhibit higher rates of serious behavior problems and mental health challenges. In 2005, only 22 percent of placements resulted in congregate care and 78 percent of children were placed in family foster care. Consequently, in that year one would expect that more children with complicated service needs were placed in resources within the community.

There is pressure throughout the foster care/congregate care system to shorten the length of time that children are in care. This factor is driven by social, child development, and budgetary considerations. As a nation and community, we believe that children rightfully belong with their families of origin or in permanent relationships with permanent caretakers. Numerous studies demonstrate that children thrive when they are wanted and grow up with nurturing parents in family settings. Further, out-of-home care is expensive to deliver and the expenses multiply when one considers all of the other implications for other systems.

Figure 29

Foster Care Admissions Congregate Care vs. Foster/Relative Home by Year



Total Admissions 2001-2005 = 3277 (Congregate Care N=102 Foster/Relative Home N=2250)

Resource: NYS OCFS Data Warehouse (children in foster care from various levels of service)

Therefore, great attention is given to the length of time that children remain in care.

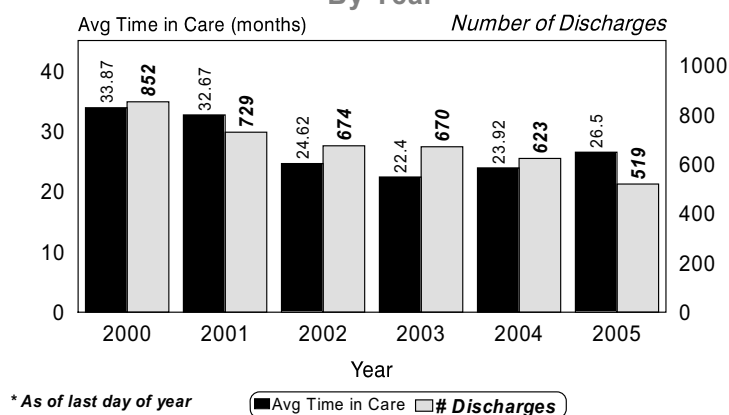
In Erie County for the period of 2000 to 2005, length of stay vacillated. For the years 2000 to 2001, the average length of stay was thirty-three months for children in foster care (Figure 30). From 2002 to 2003 there was a significant reduction in the average length of stay to nearly twenty-four

months. In the next two-year period (2004 to 2005), foster care placements averaged just over twenty-five months. The average reduction in length of stay was reduced by approximately 24 percent over this six-year period.

One of the major challenges to the child welfare system has been referred to as recidivism, or the re-placement in care following reunification with family. Multiple foster care placements are considered to have negative consequences on child development. Furthermore, if the push is to quickly return a child from foster care, that child may be returning to unsafe circumstances with unskilled or unwilling parents.

Figure 30

Foster Care Discharged Children* Number and Time in Care By Year



* As of last day of year

Resource: NYS OCFS Data Warehouse (children in foster care from various levels of service)

The overrepresentation of minorities in out-of-home care has gathered the attention of child welfare policy makers throughout the U.S. According to Figure 31 (refer to page 24), Black/African American children in Erie County were overrepresented among the foster care population more than any other group. **While African Americans represent**

approximately 13 percent of Erie County and 41 percent of City of Buffalo residents, for the period 2002 to 2005, they represented nearly 58 percent of the foster care population. Specific responses to this reality will be included in the Discussion section of this report.

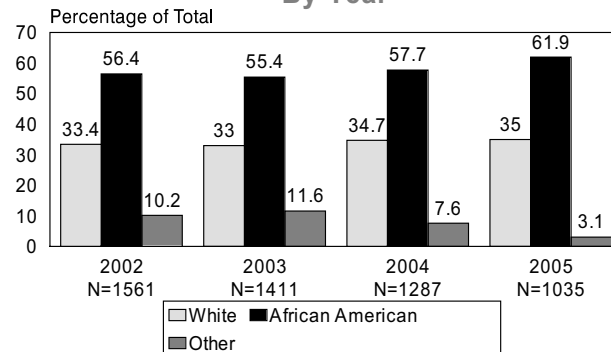
Wraparound

Erie County Family Voices Network Wraparound: (WRAP) is the program in Erie County that utilizes the “wraparound” service model. The essential components of WRAP include flexible funding, responding to individualized needs, informal services to complement formal services, and “no rejection” due to challenging service needs. This model relies on a multidisciplinary approach to serve children and youth that are at high risk of residential placement due to mental health and serious behavior difficulties. The aim is to offer meaningful help when children and families need it the most. While this program might be considered as a mental health intervention, it includes many of the children and families that in previous years were consumers of Traditional Preventive Services, Intensive Preventive Services, and Foster Care.

All Erie County data gathered from the WRAP program, including case process events, demographic, and geographic characteristics, are for the years 2004 to 2005. Figures 32 to 36 present the following during this time period: Age at Enrollment, School District at Enrollment for Buffalo and First Ring Suburbs, Enrollment by Zip Code, Race at Enrollment, and Living Situation at Enrollment.

Figure 31

Foster Care: Children In Care Race By Year



Resource: NYS OCFS Data Warehouse (children in foster care from various levels of service)

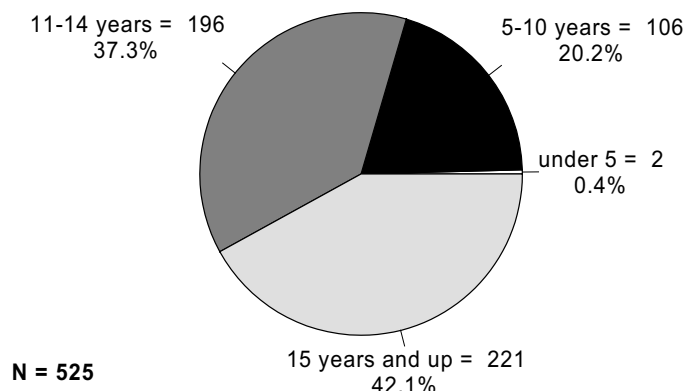
The number of cases that were opened in the WRAP program grew from 248 to 525 in one year. Families in the total for both years may have entered the WRAP program as early as 2003. However, the number of case openings in 2005 when compared to 2004 increased by approximately 110 percent. In that time, children 15 to 18 represented approximately 42 percent of the overall WRAP caseload (Figure 32). The program caseload doubled in all categories.

Youth from the City of Buffalo represented the largest geographic grouping of WRAP consumers, averaging 28 percent, and 7 out of the 10 zip codes with the most WRAP consumers are located in the City of Buffalo. (Figures 33 and 34 – refer to page 25).

The number of Buffalo School District children and youth in WRAP grew by more than 140 percent, while consumers from the

Figure 32

Family Voices Network: WRAP Age At Enrollment 2005



first-ring suburbs of Amherst, Cheektowaga, and Tonawanda experienced a similar growth rate (Figure 33). However, in terms of raw numbers, children from the Buffalo School District far exceeded each of the first-ring suburbs and the total for those suburbs together. African American children comprised nearly 30 percent of the WRAP consumers and were significantly overrepresented when compared to the percentage of African Americans among all Erie County residents (Figure 35 – refer to page 26). Children entering WRAP came from a diversity of living situations, but the largest category for both years came from family settings (Figure 36 – refer to page 26). Children from single parent families when compared with children from two parent families are nearly 70 percent more likely to be consumers of WRAP services. Children already in out-of-home care and in “other” living situations represented nearly 23 percent of the WRAP caseload.

Typically, the children requiring WRAP live in the City of Buffalo with their families. While the majority of these consumers (52 percent) were identified as Caucasian, Black/African American children were overrepresented in comparison to the U.S. and Erie County populations. However, when compared to the City of Buffalo population, Black/African American consumers of WRAP are underrepresented (approximately 41 to 30 percent).

Critical “Deep End” Services

This section describes services to youth and families in crisis offered by Compass House, Suicide Prevention and Crisis Service, the

Coordinating Council, and Erie County Medical Center. These service organizations are an essential part of our safety net for youth. Children appear at these points of care when they have no other appropriate level of help from informal or formal helping systems.

Compass House is a community-based not-for-profit organization that offers emergency shelter services for runaway and homeless

youth. The shelter program is accessible on a twenty-four-hour basis each day of the year and includes food, shelter, crisis counseling, family and individual counseling, referrals, advocacy, and aftercare for up to thirteen youth. Compass House services are intended to provide an immediate safe environment for homeless or runaway youth, prevent chronic homelessness, and support self-sufficiency.

Figure 33

Family Voices Network: WRAP School District at Enrollment Buffalo and First Ring Suburbs by Year

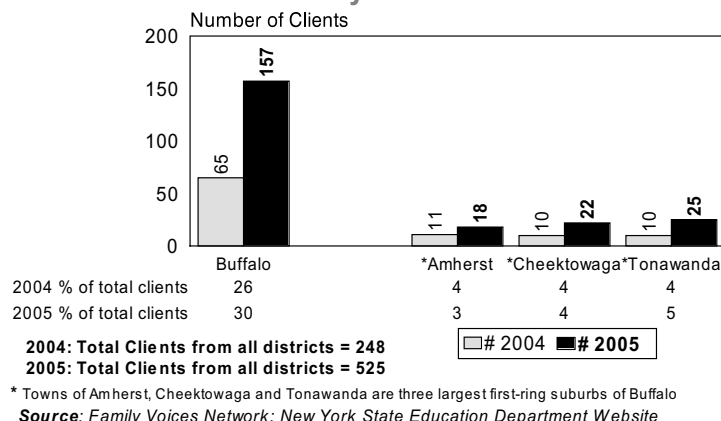


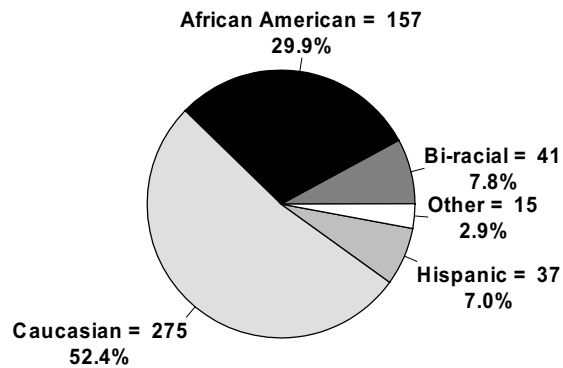
Figure 34

Family Voices Network: WRAP Top 10 Highest Enrollments by Zip Code Data as of 9/06

Buffalo Zip Code	Number of Clients
14215	26
14213	19
14207	18
14220	16
14150	14
14210	13
14211	13
14221	11
14216	9
14224	9

Figure 35

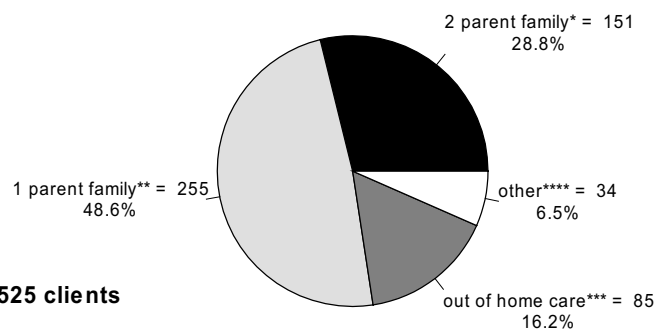
Family Voices Network: WRAP Race At Enrollment 2005



N = 525 clients

Figure 36

Family Voices Network: WRAP Living Situation At Enrollment 2005



N = 525 clients

* **2 parent family**: includes family-based treatment, grandparent, 2 parent adoptive family, 2 parent family, other relative's home

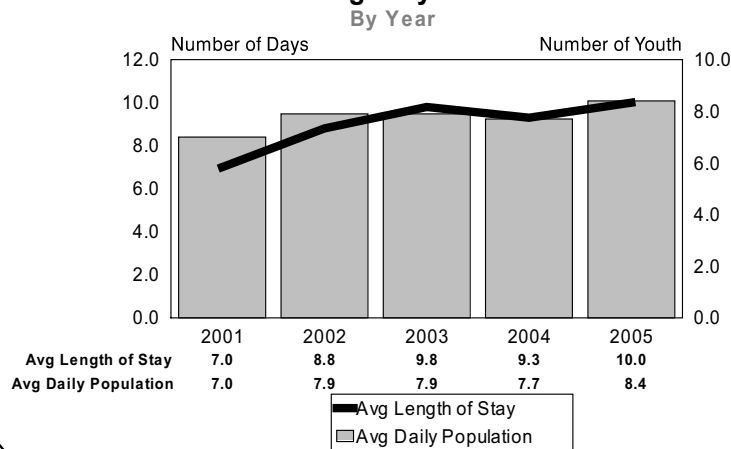
****1 parent family**: includes 1 parent adoptive family, 1 parent family

*****out of home care**: includes RTC/RTF, community residence, group home, foster care

******other**: includes runaway, homeless, detention, acute care inpatient, other

Figure 37

Compass House Average Length of Stay and Daily Population at Emergency Shelter



Data from Compass House for the years 2001 to 2005 indicate that an annual average of 312 youth required shelter services because they were homeless or runaways. While the number of intakes was fairly stable over this time period, the accumulated length of stay required by these youth rose by nearly 23 percent from 2,502 to 3067. Figure 37 shows that on an individual basis the average length of stay for youth entering the shelter increased from seven days to ten days. Further, by agency policy and contract stipulations, the maximum length of stay for youth entering the shelter is thirty days.

Over this five-year period, there has been an increase in the number of youth requiring waivers of the policy or administrative extensions (Figure 38). In 2001, there were only 4 youth that stayed beyond the thirty-day limit and in both 2004 and 2005, 15 youth required extensions. This more than tripled the number of administrative extensions. While we can only speculate as to why these youth remained in care for significantly

longer periods of time, other data illustrates characteristics of the shelter consumers. According to Compass House data from 2002 to 2004, the ages of children entering the shelter ranged from 11 to 17 years old. An average of 55 percent of the youth entering the shelter were 16 to 17 years old. *Of the youth in the Compass House shelter, from 2002 to 2004, there was an increase of 20 percent in consumers with a prior history in residential care.*

Suicide Prevention and Crisis Service is a community-based not-for-profit organization that offers a multitude of services that include Mental Health Outreach Services and Sexual Assault Services. The consumers of these services include children or adult victims as well as their family members. The services are in the form of hotline assistance, crisis intervention, case management, therapy or linkage. Figure 39 (refer to page 28) offers a glimpse of the total units of mental health services offered by this agency's Outreach Service in 2004 and 2005. Utilization of the Outreach Service declined from 1,901 units to 1,862 units, slightly more than 2 percent, over the two-year period. In 2005, data was included to identify services to children. There were 154 units of service delivered, more than 8 percent of the caseload, in 2005.

Children represented significantly greater portions of the Crisis Service Sexual Assault Services caseload that were delivered over this same time period. Figure 40 (refer to page 28) indicates that in 2004 and 2005, 54 and 92 children,

Figure 38

Compass House Extended Stays Requiring Extensions

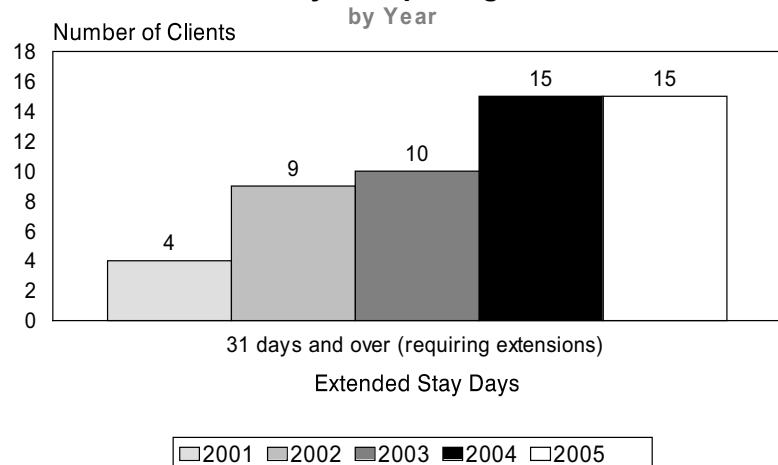
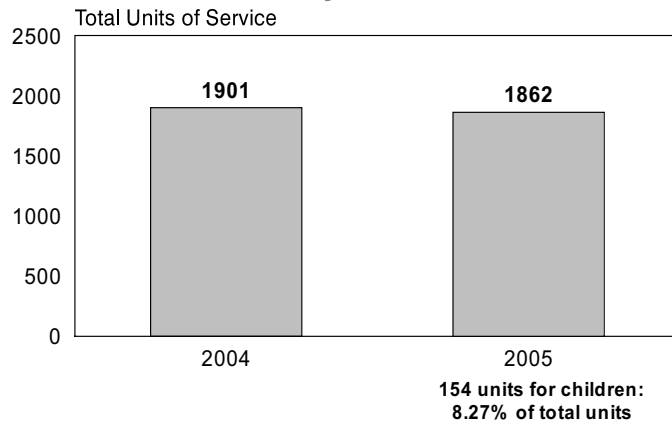


Figure 39

Crisis Service Mental Health Interventions Outreach Service Units: *Adult and Children* By Year



respectively, received Sexual Assault Services. *Not only were children more prominently represented in the Crisis Service Sexual Assault Services caseload, the need for this specialized intervention increased by more than 80 percent over the same two-year period.*

The Safety Net for Youth Committee is a designated standing Committee of the Coordinating

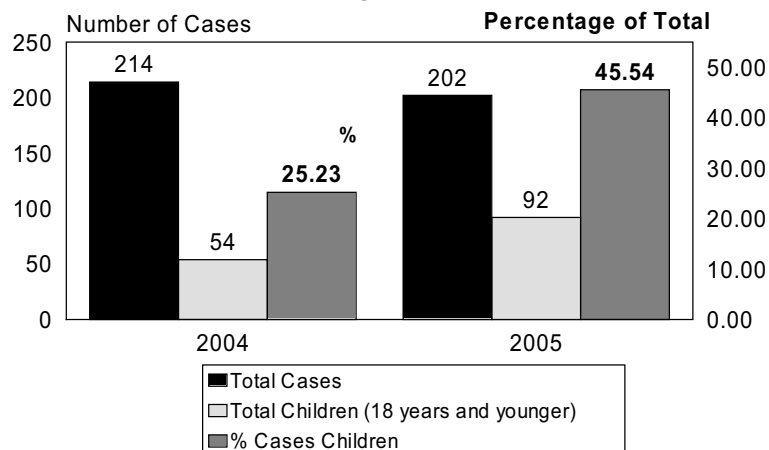
Council. It was established in 1998 to offer services for “hard to serve or hard to place children.” These children and youth were deemed to be at elevated risk of harm because services appropriate to their needed level of care could not be accessed under the existing eligibility criteria of various specialized programs. In other words, system and program eligibility rules were actually barriers to helping these struggling youth.

The Comprehensive Psychiatric Emergency Program (CPEP) is considered a “deep-end” service. It is an emergency psychiatric program offered by the Erie County Medical Center (ECMC). The CPEP Unit offers a multidisciplinary assessment of consumers, including children that present with mental health problems. As a consequence of assessments, individuals may be treated by referral to community agencies or admitted for psychiatric care.

ECMC collected data for the years 2004 and 2005 regarding presentations at CPEP, hospital admissions, and length of stay for youth under 18 years of age (Figure 41 – refer to page 29). During this two-year period, the number of children presenting at the unit for psychiatric emergency services declined by 18 percent. *However, in the same time period, the admissions of children to in-patient psychiatric care rose from 89 to 195, an increase of nearly 120 percent.* Further, Figure 41 (refer to page 29) illustrates that when children were admitted to ECMC for in-patient psychiatric care, their length of stay increased from an average of 17.1 to 28.3 days, or 65 percent.

Figure 40

Crisis Service Sexual Assault Services By Year

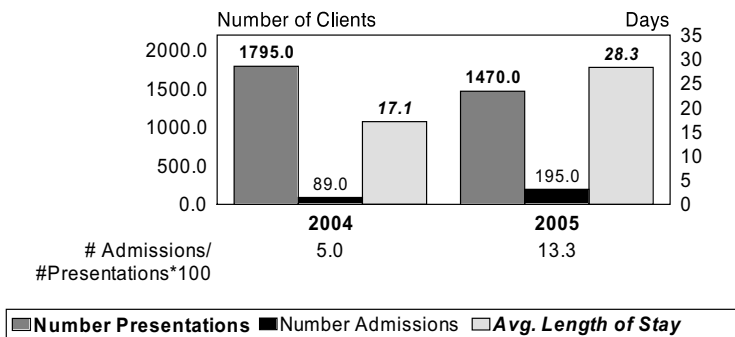


Discussion

This report has examined three key factors – poverty, violence, and child abuse and maltreatment – that affect the lives of children and families in Erie County. While the report is structured to examine these factors separately, it does not suggest that these factors are independent and

Figure 41

Erie County Medical Center Comprehensive Psychiatric Emergency Program (CPEP) Presentations, Admissions & Length of Stay Clients Under Age 18 by Year



exclusive of each other. The reality is that many children and families in Erie County concurrently experience all three of these social problems. Additionally, extensive social science research generally demonstrates that our most vulnerable children and families are poor, ethnically and racially diverse, headed by single parents, and faced with mental health and/or substance abuse problems.

Erie County is on par with New York State as to the percentage of single female headed families but the City of Buffalo is almost double that percentage. This should cause policy makers to examine the factors that help to sustain a community-wide pattern in which families with only one parent has become the norm.

While no significant disparity exists in the female/male ratio when compared to the U.S. population, when other factors are examined, such as family structure and rates of poverty, serious questions are raised about the

ability or willingness of males in our community to accept socially defined responsibilities. At the community and policy level, we need to consider the employment and financial opportunities that are available to males in their effort to support their children and families.

In the discussion of poverty, we note that while it seems to have most affected those residing in the City of Buffalo, other communities should not consider themselves immune from the poverty. Growth in the rate of poverty within our first-ring suburbs demonstrates that all of Erie County, including towns and villages, must understand the social consequences of poverty and take steps to support the economic health of our families.

Educational attainment is a variable that is positively correlated with economic health. When data from The Institute for Local Governance and Regional Growth (2006) is examined, a correlation between economic wellbeing and educational attainment emerges. These data support the assertion

that educational attainment is a key building block for escaping poverty. However, this is only one factor in reaching higher social economic health and it is a long-term factor. The community is already severely affected by poverty and needs to adopt more immediate solutions to the problem.

We noted the levels of poverty that exist in the City of Buffalo, as well as the high rate of reporting to Child Protective Services. This is to be expected when examining sociological research on child abuse and neglect. The Third National Incidence Study of Child Abuse and Neglect (Sedlak and Broadhurst, 1996) demonstrated that when families with an annual income of \$15,000 or less were compared with families with an annual income of \$30,000 or more they were 22 times more likely to be harmed by maltreatment, 14 times more likely to be harmed by physical abuse, and 44 times more likely to be harmed by neglect.

Sedlak and Broadhurst (1996) demonstrated that when children of single-parent households were compared with children of two-parent households, they had a 77 percent greater chance of being harmed by physical abuse and an 87 percent greater chance of being harmed by physical neglect. We have seen no evidence from the examination of social factors in Erie County that children would experience lower rates of poverty, single-parent status, and child abuse when compared with other communities in the U.S.

In examining child abuse and maltreatment reporting, we determined that Erie County experienced a child abuse and

neglect reporting rate for 2006 of nearly 55 per 1,000 children, more than 29 percent higher than the national rate established in 2004. This is alarmingly high when compared with national data and it challenges the community to change the circumstances in which children, the individuals least responsible and capable of self advocacy, are exposed to harm or risk of harm.

We have a moral obligation to prevent, and to the extent possible, eliminate the problem of child abuse and maltreatment. Behavioral, medical, and social sciences research have documented serious and long-term negative impacts this social problem has on human development. ***Failure to address the issue of child abuse and maltreatment will require continuous and repeated long-term expenditures in order to deliver social services to the affected children and future adults. Responsibility to fund these services adequately will rest on Erie County government.***

While we are unable to determine the specific effects of the 2005 cuts in Traditional Preventive Services, there were corresponding increases for services in other components of the community network. We noted the growth of an Intensive Preventive Services waiting list, increased demand for shelter services and increased hospitalizations for mental illness or severe behavioral problems subsequent to the funding cuts. If these children and families indeed needed services, it is reasonable to assume that some of them were served at other points in the child welfare continuum. In most cases, this service would be delivered at a more costly level of service such as

Intensive Preventive Services. In addition to being a more costly intervention than what may have been required, the probability exists that families that appropriately needed intensive services were displaced by families that could have appropriately been served with less intensive services such as TPS.

The disproportionate representation of minority children in out of home care has long standing and significant implications for Erie County. ***Factors that follow from systematically displacing generations of children from their families of origin, communities, and cultures, will increase the likelihood that the practice becomes a permanent part our child welfare system.***

The Erie County Department of Social Services has recently invited community service providers to submit proposals for addressing the disproportionate representation of Black/African American children among our foster care population. This effort will help to understand the issues involved and reduce the rates of placement for minority children.

By definition, only the most serious cases are admitted for in-patient psychiatric care. The typical standard is that the individual is deemed to be a danger to self or others. After examining the data regarding children that presented for emergency mental health services at the Erie County Medical Center, either we have an alarming spike in the rate of the most serious mental illness among our children or other factors are involved.

In an era when health insurers are emphasizing the reduction in days

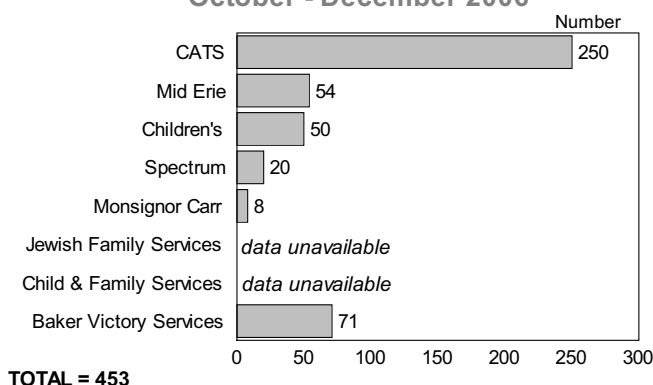
of care and preventing in patient treatment events, Erie County has experienced an increase in the demand for such services. As a community we must know whether children and families receive the appropriate levels and frequency of care in community-based or home-based delivery models before they resort to emergency services.

It should be mentioned at this point that little data is available regarding the time span that exists between the perception by parents or guardians of a child's mental health problem, their subsequent seeking of help and the actual delivery of service by a professional mental health provider. However, we should have concern if availability of service is a significant barrier to obtaining mental health services. Figure 42 (refer to page 31) is a snapshot of such a barrier to help. This graph represents Erie County children on waiting lists for mental health services during the last quarter of 2006. More than 453 children were waiting to be assessed for behavioral or mental health problems. It has been demonstrated that successful client engagement and quality of child welfare services are enhanced by prompt social service responses to requests for help (Rothman, 1998). We have a stake in reducing or eliminating the factors that result in significant delays in obtaining mental health services for our children.

Finally, we have introduced the innovative new model of WRAP services. If this model is effective with youth and families struggling with the most serious challenges in

Figure 42

Article 28 & 31 Clinics Children on Waiting Lists October - December 2006



terms of behavior and mental health, it would make sense to expand use of this service model to prevent out of home placement, support family foster care, kinship placements, or expedite and strengthen reunification.

Recommendations

Investing in positive outcomes for children and families benefits the entire community now and into the future. In meeting statutory obligations and acting in accord with our values, the Coordinating Council makes the following recommendations:

1) Economic policies for income security are made at the federal and state level; however, at the Erie County level efforts must continue to ensure that our children and families have access to federal and state benefits. Out- reach efforts in the form of information and referral should be a component of all community- based services to families. For example, information

regarding child support collection, employment programs, federal earned income tax credit, subsidized child care, and health insurance should be provided. This information should be available through faith-based, non-sectarian, and government organizations.

2) Systematically use data that is already being collected through official (government) and sentinel organizations. Attempt to standardize categories of data regarding children, including collection methods and definitions, across various systems. The Coordinating Council should annually select, analyze, and publish information on at least 10 indicators of child wellbeing that can be made into a publicly available report.

3) Data on racial characteristics should be collected by all organizations, including law enforcement and all Erie County departments and its contractors that serve children and families. The data collection must be consumer

driven. For example, the U.S. Census Bureau allows individuals to self-identify in determining race. This approach should be applied to all Erie County direct or contracted services.

4) Immediate attention must be paid to the alarmingly high rate of arrests for domestic violence in the City of Buffalo. Children and domestic partners are exposed to rates of violence in the home that are significantly higher than those found in Erie County and the U.S. This situation should be examined on all levels.

5) For youth in placement or incarceration as a result of juvenile delinquency, specific and intensive programs are needed to support their reintegration with education, family, and community systems. After release from confinement, these youth remain at-risk and still need to accomplish educational and employment milestones in order to be contributing members of the community.

6) The circumstances that lead to the high rates of child abuse and maltreatment reporting in Erie County must be analyzed*. The rate of children reported to Erie County's CPS is extremely high when compared to national data. Additionally, the rate of indication for CPS cases is significantly lower than what would be expected when compared with other data. It is likely that community options other than reports to CPS can be used to assist families in need.

7) Since children of color are over-represented as consumers of "deep-end" or more restrictive services, and all levels of government have identified this as a critical issue,

programs specifically designed to address minority over-representation should be a focus of future Coordinating Council reports. Additionally, child caring professionals from minority communities must be included in future examinations of trends.

8) Since children in foster care have much higher need for economic, educational, and social service support, Erie County should develop new strategies to enhance the likelihood that our children in foster care will attain self-sufficiency. Collaborations between government and private sectors, specifically education, employment, social services,

and youth development agencies, should offer programs that assure economic opportunities to our foster children at the earliest point possible in their developing years.

9) Measurement and outcomes should be established so that:

- Future reports can be used by child caring systems when evaluating program effectiveness;
- The degree to which macro level factors such as crime and poverty that have an impact on the demand for child services in Erie County and the City of Buffalo can be examined;

- Policy makers in child and family serving systems can apply evaluative information in annual and long range planning;
- Future evaluations can determine the extent of social service needs for families experiencing multi-generational poverty, violent behavior by youth, grandparents as caretakers, and homelessness;
- Organizations and collaborations can stress action as well as process in their attempts to handle crisis or critical case events.

* According to the Erie County Department of Social Services, the New York State Registry statistics disregard suspended or consolidated reports. Intake statistics maintained by Erie County include initial, subsequent, and monitoring reports. These statistics reflect higher reporting totals than New York State statistics as follows: 2002 = 9349, 2003 = 8841, 2004 = 9118, 2005 = 9002, 2006 = 9118. Erie County, when compared to similar sized Districts in New York State, reflects similar rates of indication. National and State statistics are difficult to compare as states vary in definition of neglect and abuse.

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Factors That Affect Children and Families in Erie County: Poverty, Violence, Child Abuse and Neglect

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NOTES

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